Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF OREGON	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name Todd Middle name Fulfer Last name and Suffix (Sr., Jr., II, III)	- - -	Samantha First name A. Middle name Fulfer Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.			FKA Samantha A. German
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3177		xxx-xx-3838

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)		
		EINS	EINs		
5.	Where you live	2920 Siletz Hwy	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Lincoln	County		
		County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	 Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) 		

		GW Todd Fulfer Samantha A. Fulfe	r		Case number (if known)				
Par	t 2: T	ell the Court About \	our Bankruptcy Case						
7.		hapter of the ruptcy Code you are		ption of each, see <i>Notice Required by</i> top of page 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for Bank box.	kruptcy			
	choos	sing to file under	Chapter 7						
			☐ Chapter 11						
			☐ Chapter 12						
			☐ Chapter 13						
8.	How y	ou will pay the fee	about how you may pay	y. Typically, if you are paying the fee yo	with the clerk's office in your local court for mourself, you may pay with cash, cashier's check, lf, your attorney may pay with a credit card or c	or money			
					n, sign and attach the Application for Individuals	s to Pay			
			☐ I request that my fee k but is not required to, w applies to your family si	The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.					
9.	bankr	you filed for uptcy within the years?	■ No						
			District	When	Case number				
			District	When	0				
			District	When	Case number				
10.		ny bankruptcy pending or being	■ No						
	filed b not fili you, o	or y a spouse who is ing this case with or by a business er, or by an	☐ Yes.						
			Debtor		Relationship to you				
			District	When	Case number, if known				
			Debtor		Relationship to you				
			District	When	Case number, if known				

Has your landlord obtained an eviction judgment against you?

Voluntary Petition for Individuals Filing for Bankruptcy Case 19-61203-tmb7 Doc 1 Filed 04/19/19

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

11. Do you rent your residence?

Go to line 12.

No. Go to line 12.

bankruptcy petition.

☐ No.

Yes.

	otor 1 GW Todd Fulfer Samantha A. Fulfe	er			Case number (if known)			
Par	Report About Any Bu	sinesses	You Owr	ı as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	■ No. Go to Part 4.					
		☐ Yes.	Yes. Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Stat	te & ZIP Code			
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:			
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))			
	☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	е			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline: operation	u are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate dlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am ı	not filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.			, ,, , ,			
	property that poses or is alleged to pose a threat	☐ Yes.						
	of imminent and identifiable hazard to public health or safety?	□ Tes.	What is	the hazard?				
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
					Number, Street, City, State & Zip Code			

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 GW Todd Fulfer Samantha A. Fulfe	er			Case number	(if known)
Par	t 6: Answer These Quest	ions for R	Reporting Purposes			
16.	What kind of debts do you have?	16a.		ily consumer debts? Con personal, family, or house		ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.		ily business debts? Busi		hat you incurred to obtain ness or investment.
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts y	ou owe that are not consu	umer debts or busines	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Cha	apter 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	are paid that funds will b	r 7. Do you estimate that a be available to distribute to		erty is excluded and administrative expense
	are paid that funds will		■ No			
	be available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do	1 -49		1 ,000-5,00	0	□ 25,001-50,000
	you estimate that you owe?	□ 50-99		5001-10,00		5 0,001-100,000
		<u> </u>		□ 10,001-25,	000	☐ More than100,000
		□ 200-9) 99			
19.	How much do you	\$ 0 - \$	\$50.000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,001 - \$100,000 □ \$100,001 - \$500,000			1 - \$50 million	☐ \$1,000,000,001 - \$10 billion
					01 - \$100 million	□ \$10,000,000,001 - \$50 billion
		□ \$500	,001 - \$1 million	□ \$100,000,0	001 - \$500 million	☐ More than \$50 billion
20.	How much do you	□ \$0 - \$	\$50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?	\$ 50,	001 - \$100,000	_ ' ' '	01 - \$50 million	\$1,000,000,001 - \$10 billion
			,001 - \$500,000	_ ' ' '	01 - \$100 million	□ \$10,000,000,001 - \$50 billion
		□ \$500	,001 - \$1 million	□ \$100,000,0	001 - \$500 million	☐ More than \$50 billion
Par	7: Sign Below					
For	you	I have e	xamined this petition, and	I declare under penalty of	perjury that the inform	nation provided is true and correct.
						under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.
			orney represents me and I nt, I have obtained and rea			an attorney to help me fill out this
		I reques	t relief in accordance with	the chapter of title 11, Uni	ted States Code, spec	ified in this petition.
			tcy case can result in fines			r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519
			Todd Fulfer		/s/ Samantha A.	
			dd Fulfer re of Debtor 1		Samantha A. Full Signature of Debtor	
		Execute	d on April 7, 2019 MM / DD / YYYY			il 7, 2019 / DD / YYYY
			ואוואו / טט / ז ז ז ז		IVIIVI	/ טט / וווו

Debtor 1	GW Todd Fulfer
Debtor 2	Samantha A. Fulfer

Case	number	(if known)
------	--------	------------

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Mark A. Sherman	Date	April 7, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Mark A. Sherman		
Printed name		
Mark A. Sherman, Attorney Firm name		
PO Box 483		
McMinnville, OR 97128-0483		
Number, Street, City, State & ZIP Code		
Contact phone 503-472-8610	Email address	markshermanattorney@yahoo.com
74298 OR		
Bar number & State		

United States Bankruptcy Court District of Oregon

In re	GW Todd Fulfer Samantha A. Fulfer	S	Case No.		
	Camanina 7.1 Tanor	Debtor(s)	Chapter	7	
	DISCLASTIBE OF COMPE		DNEV EOD D	EDTOD(C)	
	DISCLOSURE OF COMPE			. ,	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filinger rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	, or agreed to be pai	d to me, for service	
	For legal services, I have agreed to accept		\$ <u></u>	1,000.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	1,000.00	
2. \$	335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. 7	The source of compensation to be paid to me is:				
	☐ Debtor ☐ Other (specify): legal	insurance			
5.	I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are men	mbers and associate	s of my law firm.
I	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				ny law firm. A
6.]	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	ts of the bankruptcy	case, including:	
t c	Analysis of the debtor's financial situation, and rendo Preparation and filing of any petition, schedules, state. Representation of the debtor at the meeting of credit [Other provisions as needed] exemption planning; preparation and files.	tement of affairs and plan which ors and confirmation hearing, a ling of reaffirmation agreer	h may be required; nd any adjourned he ments and applica	earings thereof;	
7. I	and filing of motions pursuant to 11 US By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any disany other adversary proceeding. Recover.	ee does not include the followin schargeability actions, jud	g service: icial lien avoidan	-	tay actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	ny agreement or arrangement fo	r payment to me for	representation of th	ne debtor(s) in
Α	pril 7, 2019	/s/ Mark A. Sherr	man		
D_i	ate	Mark A. Shermai Signature of Attorn Mark A. Shermai PO Box 483 McMinnville, OR	ey n, Attorney		
		503-472-8610			
		<u>markshermanatt</u> Name of law firm	orney@yahoo.co	m	

UNITED STATES BANKRUPTCY COURT DISTRICT OF OREGON

	DISTRICT OF O	REGON				
In re) Case No.		(If Known)			
GW Todd Fulfer Samantha A. Fulfer	,	7 INDIVIDUAL DEBTOR	R'S*			
Debtor(s)	,) STATEMENT OF INTENTION(S)) PER 11 U.S.C. §521(a)				
IMPORTANT NOTICES TO DEBTOR(S): 1. Complete, sign and file this form even if you have r	no debts secured by proper	ty of the estate or personal	property subject to unexpired leases. If			
creditors are listed, make sure the certificate of service		by of the estate of personal	property subject to unempired reasons in			
2. Failure to perform the intentions as to property stat	ed below within 30 days a	fter the first date set for the	Meeting of Creditors			
under 11 USC §341(a) may result in relief for the cree	ditor from the Automatic S	tay protecting such propert	y.			
PART A - Debts secured by property of the estate. (ladditional pages is necessary.)	Part A must be fully compl	leted for each debt which is	s secured by property of the estate. Attach			
☐ IF NONE - Check this box. Property No. 1		1				
Creditor's Name:		Describe Property Secur				
Neill's Wheels		2002 Dodge Ram 2500	2000,000 miles			
Property will be (check one): ☐ SURRENDERED	■ RETAINED					
If retaining the property, I intend to (check at least of ☐ Redeem the property	ne):					
☐ Reaffirm the debt						
■ Other. Explain (for example, avoid lien using 11	USC §522(f) maintain	payments				
Property is (check one): ■ CLAIMED AS EXEMP	PT NOT CLAIMED	AS EYEMPT				
Troperty is (check one). — CLAIMLD AS EXEMI	1 LINOT CLAIMED	AS EXEMIT				
☐ IF NONE - Check this box.						
Property No. 2						
Creditor's Name: Toyota Motor Credit Corp		Describe Property Secur 2018 Toyota Rav4 26,0				
Property will be (check one): ☐ SURRENDERED	■ RETAINED					
If retaining the property, I intend to (check at least of ☐ Redeem the property	ne):					
☐ Reaffirm the debt						
■ Other. Explain (for example, avoid lien using 11	USC §522(f) maintain	payments				
Property is (check one): ■ CLAIMED AS EXEMP	PT NOT CLAIMED	AS EXEMPT				
PART B - Personal property subject to unexpired lea pages if necessary.)			For each unexpired lease. Attach additional			
■ IF NONE - Check this box.						
Property No. 1	1					
Lessor's Name:	Describe Leased Proper	·ty:	Lease will be assumed pursuant to 11 USC §365(p)(2)			

Continuation sheets attached (if any).

IDECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE INDICATES INTENTION AS TO ANY PROPERTY OF MY ESTATE SECURING A DEBT AND/OR PERSONAL PROPERTY SUBJECT TO AN UNEXPIRED LEASE.	I/WE, THE UNDERSIGNED, CERTIFY THAT O DOCUMENT AND LOCAL FORM #715 WERE CREDITOR NAMED ABOVE.	
DATE: April 7, 2019	DATE: April 7, 2019	
/s/ GW Todd Fulfer	/s/ Mark A. Sherman	74298 OR
DEBTOR'S SIGNATURE	DEBTOR OR ATTORNEY'S SIGNATURE	OSB# (if attorney)
/s/ Samantha A. Fulfer		
JOINT DEBTOR'S SIGNATURE (If applicable)	JOINT DEBTOR'S SIGNATURE (If applicable an	d no attorney)
	Mark A. Sherman 503-472-8610	
	PRINT OR TYPE SIGNER'S NAME & PHONE N	Ю.
	PO Box 483	
	McMinnville, OR 97128-0483	
	SIGNER'S ADDRESS (if attorney)	

NON-JUDICIAL REMEDY WHEN CONSUMER DEBTOR FAILS TO TIMELY PERFORM STATED INTENTIONS

Creditors, see <u>Local Form #715</u> [attached if this document was served on paper] if you wish information on how to obtain non-judicial relief from the automatic stay of 11 U.S.C. §362(a) as to your collateral.

QUESTIONS????

Call an attorney with questions about these procedures or the law. However, only call the debtor's attorney if you have questions about the debtor's intent as to your collateral.

521.05 (12/1/16) Page 2

Fill	n this inforn	nation to identify your	case:			
Deb	tor 1	GW Todd Fulfer				
		First Name	Middle Name	Last Name		
	tor 2 ise if, filing)	Samantha A. Fulf	er Middle Name	Last Name		
` `				Last Name		
Unit	ed States Ba	nkruptcy Court for the:	DISTRICT OF OREGON			
	e number _					
(if kno	own)				_	c if this is an ded filing
					amon	aca ming
~ · ·		1000				
		rm 106Sum				
				Certain Statistical Information		12/15
infor	mation. Fill o	out all of your schedule	es first; then complete the i	re filing together, both are equally responsible information on this form. If you are filing amen the box at the top of this page.		
Part	1: Summ	arize Your Assets				
					Your a	ssets
						of what you own
1.	Schedule A	/B: Property (Official Fo	orm 106A/B)		•	0.00
	1a. Copy line	e 55, Total real estate, fr	om Schedule A/B		\$	0.00
	1b. Copy line	e 62, Total personal prop	perty, from Schedule A/B		\$	38,590.00
	1c. Copy line	e 63, Total of all property	on Schedule A/B		\$	38,590.00
Part	2: Summ	arize Your Liabilities				
						abilities
					Amoun	t you owe
2.			aims Secured by Property (C nn A. <i>Amount of claim.</i> at the	Official Form 106D) be bottom of the last page of Part 1 of <i>Schedule D</i>	\$	30,000.00
2		•		, 0		
3.	3a. Copy th	e total claims from Part	Unsecured Claims (Official Foundation Founda	from line 6e of <i>Schedule E/F</i>	\$	2,645.00
	3h Cony th	e total claims from Part	2 (nonnriority unsecured clair	ms) from line 6j of Schedule E/F	\$	42,482.00
	ов. Сору и	o total olaimo nom r are	- (nonphoney unocoured oldin	no, nom une of or conecute 27		72,702.00
				Your total liabilitie	s \$	75,127.00
				rour total nubinito		10,121.00
Part	3: Summ	arize Your Income and	Fynenses			
4.		Your Income (Official Foombined monthly income			\$	5,050.00
5.		Your Expenses (Official			\$	5,009.00
Part			Administrative and Statisti		·	
6.	-	-	er Chapters 7, 11, or 13? on this part of the form. Che	ck this box and submit this form to the court with y	our other sch	nedules.
	■ Yes					
7.		of debt do you have?				
				ots are those "incurred by an individual primarily fo	r a personal,	, family, or
			- , ,	or statistical purposes. 28 U.S.C. § 159.		
	☐ Your d	ebts are not primarily	consumer debts. You have	nothing to report on this part of the form. Check th	is box and s	ubmit this form to

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Official Form 106Sum

the court with your other schedules.

Best Case Bankruptcy

page 1 of 2

Summary of Your Assets and Liabilities and Certain Statistical Information

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,412.95

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,645.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ \$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as	· —	0.00
priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,645.00

Debtor	1	GW Todd Fulfer			
		First Name	Middle Name Last Name		
Debtor Spouse,		Samantha A. Fulfer First Name	Middle Name Last Name		
			RICT OF OREGON		
Jnitea	States Ba	ankruptcy Court for the: DISTF	RICT OF OREGON		
Case n	umber				☐ Check if this is ar
					amended filing
		4004/5			
		orm 106A/B			
3ch	edul	le A/B: Property	y		12/15
format	ion. If more every que	re space is needed, attach a separ stion.	ossible. If two married people are filing together, both a rate sheet to this form. On the top of any additional pag or Other Real Estate You Own or Have an Interest In		
Do vo	u own or	have any local or equitable interes	et in any recidence, building land, or cimilar property?		
-			st in any residence, building, land, or similar property?		
_	. Go to Pa				
☐ Ye	s. Where	is the property?			
2	L	Your Vehicles			
o you omeon Cars	own, lea ne else dri s, vans, tr	se, or have legal or equitable	interest in any vehicles, whether they are register report it on Schedule G: Executory Contracts and Unicles, motorcycles		ehicles you own that
o you omeon Cars No	own, lead the else dri s, vans, tr	ise, or have legal or equitable ives. If you lease a vehicle, also rucks, tractors, sport utility ve	report it on Schedule G: Executory Contracts and Uhicles, motorcycles	Inexpired Leases.	,
Oo you omeon . Cars \(\sum \) No \(\sum \) Ye	own, lea ne else dri s, vans, tr o es	ase, or have legal or equitable ives. If you lease a vehicle, also rucks, tractors, sport utility ve	report it on Schedule G: Executory Contracts and U hicles, motorcycles Who has an interest in the property? Check one	Do not deduct secured cl	laims or exemptions. Put ed claims on <i>Schedule D:</i>
Do you omeon Cars No Ye 3.1	own, lea ne else dri s, vans, tr o es	ise, or have legal or equitable ives. If you lease a vehicle, also rucks, tractors, sport utility ve	report it on Schedule G: Executory Contracts and U hicles, motorcycles Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
Oo you omeon Cars No Ye	own, lea le else dri s, vans, tr c es Make: Model:	rise, or have legal or equitable lives. If you lease a vehicle, also rucks, tractors, sport utility ve	report it on Schedule G: Executory Contracts and U hicles, motorcycles Who has an interest in the property? Check one	Do not deduct secured cl	laims or exemptions. Put ed claims on Schedule D:
Oo you omeon Cars No	own, lea le else dri s, vans, tr c es Make: Model:	Toyota Rav4 2018 se, or have legal or equitable eives. If you lease a vehicle, also rucks, tractors, sport utility ve	report it on Schedule G: Executory Contracts and U hicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the
Do you omeon Cars No	own, leade else dri	Toyota Rav4 2018 se, or have legal or equitable eives. If you lease a vehicle, also rucks, tractors, sport utility ve	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the
Oo you omeon Cars No Ye	own, leade else dri	Toyota Rav4 2018 te mileage: 26,000 mation:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$20,000.00
Oo you omeon Cars No Ye 3.1	own, lea lee else dri s, vans, tr c es Make: Model: Year: Approxima Other infor	Toyota Rav4 2018 se, or have legal or equitable eives. If you lease a vehicle, also rucks, tractors, sport utility ve	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$20,000.00 Do not deduct secured of the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$20,000.00
O you omeon	own, leade else dri s, vans, tr co es Make: Model: Year: Approxima Other infor Make: Model:	Toyota Rav4 2018 te mileage: 26,000 mation:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$20,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$20,000.00
O you omeon	own, leader else drivers de la communication d	Toyota Rav4 2018 tte mileage:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$20,000.00 Do not deduct secured of the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$20,000.00
Oo you omeon Cars No Ye 3.1	own, leader else drivers de la communication d	Toyota Rav4 2018 tte mileage: mation: Dodge Ram 2500 2002 tte mileage: 2000,000	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$20,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the	laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$20,000.00 laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the
Oo you omeon Cars No Ye 3.1	own, leaded end of the control of th	Toyota Rav4 2018 tte mileage: mation: Dodge Ram 2500 2002 tte mileage: 2000,000	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$20,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the	laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$20,000.00 laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the
3.1 3.2	own, leaded end of the control of th	Toyota Rav4 2018 tte mileage: mation: Dodge Ram 2500 2002 tte mileage: 2000,000	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$20,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$20,000.00 laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own?
3.1	own, leader else dri	Toyota Rav4 2018 Ite mileage: 26,000 mation: Dodge Ram 2500 2002 Ite mileage: 2000,000 mation:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$20,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$6,000.00	laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$20,000.00 laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 Debtor 2	GW Todd Fu Samantha A		if known)
		the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here	
Part 3:	escribe Your Perso	onal and Household Items	
		egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exam</i> _l □ No	hold goods and to bles: Major appliar s. Describe	furnishings nces, furniture, linens, china, kitchenware	Same of Storiphone.
— 168	s. Describe		
		household goods, furnishings, appliances, audio-video, computer equip	\$3,000.00
■ No	ples: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners phones, cameras, media players, games	; music collections; electronic devices
Exam _l ■ No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; sta ons, memorabilia, collectibles	mp, coin, or baseball card collections;
Exam	ment for sports a ples: Sports, photo musical instr	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
10. Firea Exar	rms	s, shotguns, ammunition, and related equipment	
□ No		othes, furs, leather coats, designer wear, shoes, accessories	
		debtor clothing	\$300.00
☐ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches	, gems, gold, silver
		wedding ring	\$1,000.00
Exar □ No -	farm animals nples: Dogs, cats,	birds, horses	
■ Yes	s. Describe		
		two dogs	\$0.00

Official Form 106A/B Schedule A/B: Property

page 2

Best Case Bankruptcy

Debtor Debtor				Case number (if known)	
14. Any	other personal and	d household items you	ı did not already list, includ	ling any health aids you did not list	
■ N	_				
ПΥ	es. Give specific info	ormation			
			om Part 3, including any en	ntries for pages you have attached	\$4,300.00
Part 4:	Describe Your Finance	cial Assets			
Do you	ı own or have any le	egal or equitable intere	est in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ N	a <i>mpl</i> es: Money you h o		ur home, in a safe deposit bo	ox, and on hand when you file your petit	ion
	institutions. I		accounts; certificates of depounts with the same institutio	posit; shares in credit unions, brokerage on, list each.	houses, and other similar
	o es		Institution name:	:	
		checking at 17.1. savings	vallley Credit	Union	\$0.00
		checking at 17.2. savings	nd Valley Credit	Union	\$0.00
Exa ■ N	amples: Bond funds,	or publicly traded stock investment accounts with	th brokerage firms, money m	narket accounts	
19. No r				rated businesses, including an intere	st in an LLC, partnership, and
■ N					
ПΥ	es. Give specific info	ormation about them Name of entity:		% of ownership:	
Ne No. ■ N	gotiable instruments n-negotiable instrum	include personal checks ents are those you cann	negotiable and non-negotias, cashiers' checks, promisso ot transfer to someone by sign	ory notes, and money orders.	
_ '	os. Olvo apodino mio	Issuer name:			
<i>Ex</i> a □ N	0	RA, ERISA, Keogh, 401	(k), 403(b), thrift savings acc	counts, or other pension or profit-sharing	plans
Y	es. List each account	t separately. Type of account:	Institution name:	:	
		retirementOrego Savings Growth F		on	\$150.00

Official Form 106A/B Schedule A/B: Property page 3

Debto Debto		GW Todd Fulfer Samantha A. Fulfer	C	Case number (if known)	
Y	our sh xampl		have made so that you may continue service or use from prepaid rent, public utilities (electric, gas, water), teleco		or others
-			Institution name or individual:		
		es (A contract for a periodic pa	yment of money to you, either for life or for a number of	years)	
■ ı	No Yes	Issuer name and	description.		
	U.S.C	in an education IRA, in an a . §§ 530(b)(1), 529A(b), and 5.	ccount in a qualified ABLE program, or under a qua 29(b)(1).	lified state tuition progra	m.
-	No Yes	Institution name	and description. Separately file the records of any intere	sts.11 U.S.C. § 521(c):	
25. Tr i	•	equitable or future interests	in property (other than anything listed in line 1), and	rights or powers exercis	able for your benefit
		Give specific information about	them		
E: ■ I	xampl No		de secrets, and other intellectual property bisites, proceeds from royalties and licensing agreemen	ts	
		s, franchises, and other geness. Building permits, exclusive	eral intangibles licenses, cooperative association holdings, liquor licens	es, professional licenses	
■ ! □ `		Give specific information about	them		
Mone	y or p	roperty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	No	inds owed to you Give specific information about	them, including whether you already filed the returns an	d the tax years	
			2018 federal income tax refunds expected	federal	\$3,119.00
E:	xampl No	support es: Past due or lump sum alim Sive specific information	ony, spousal support, child support, maintenance, divord	ce settlement, property sett	lement
			child support owed by Thomas L. German	child support	\$3,800.00
		mounts someone owes you es: Unpaid wages, disability in benefits; unpaid loans you	surance payments, disability benefits, sick pay, vacation made to someone else	pay, workers' compensati	on, Social Security
■ !		Give specific information			
E: ■ I	xampl No		urance; health savings account (HSA); credit, homeown	er's, or renter's insurance	
		•	of each policy and list its value.		
Official	rorm	106A/B	Schedule A/B: Property		page 4

Case 19-61203-tmb7 Doc 1 Filed 04/19/19

Best Case Bankruptcy

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Debtor 1 Debtor 2	GW Todd Fulfer Samantha A. Fulfer		Case number (if known)	
	Compan	ny name:	Beneficiary:	Surrender or refund value:
If you some No	nterest in property that is due are the beneficiary of a living trace has died. . Give specific information		died insurance policy, or are currently entitled to rec	eive property because
	s against third parties, whethen ples: Accidents, employment dis		suit or made a demand for payment hts to sue	
☐ Yes.	. Describe each claim			
■ No	contingent and unliquidated of the contingent and unliquidated of the continuum.	claims of every nature, includ	ling counterclaims of the debtor and rights to	set off claims
	inancial assets you did not alr	eady list		
□ No	Circa anno sitia information			
■ Yes.	. Give specific information			
		preferential garnishmen Grove Federal Credit Un	ts within 90 days of filing by Heritage lion	\$1,221.00
			g any entries for pages you have attached	\$8,290.00
Part 5: De	escribe Any Business-Related Pro	perty You Own or Have an Intere	est In. List any real estate in Part 1.	
37. Do you	own or have any legal or equitabl	le interest in any business-relate	d property?	
No. G	So to Part 6.			
☐ Yes.	Go to line 38.			
	escribe Any Farm- and Commercia you own or have an interest in farmla		Own or Have an Interest In.	
′	ou own or have any legal or eq	uitable interest in any farm- c	or commercial fishing-related property?	
	es. Go to line 47.			
D. 15	B All D		PUNCTED AND	
Part 7:	Describe All Property You Own	or Have an Interest in That You	DIG NOT LIST ADOVE	
	ou have other property of any language of any language. Season tickets, country classics.			
	. Give specific information			
54. Add	the dollar value of all of your	entries from Part 7. Write tha	t number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$26,000.00		
57.	Part 3: Total personal and household items, line 15	\$4,300.00		
58.	Part 4: Total financial assets, line 36	\$8,290.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$38,590.00	Copy personal property total	\$38,590.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$38,590.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this inform	nation to identify your	case:		
Debtor 1	GW Todd Fulfer			
	First Name	Middle Name	Last Name	
Debtor 2	Samantha A. Fulf	er		
(Spouse if, filing)	First Name	Middle Name	Last Name	
	nkruptcy Court for the:	DISTRICT OF OREGON		
Case number _				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Copy the value from Check only one box for each exemption.		Specific laws that allow exemption			
		Copy the value from Schedule A/B						
	2018 Toyota Rav4 26,000 miles Line from Schedule A/B: 3.1	\$20,000.00		\$4,000.00	11 U.S.C. § 522(d)(2)			
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit				
	2002 Dodge Ram 2500 2000,000 miles Line from Schedule A/B: 3.2	\$6,000.00		\$4,000.00	11 U.S.C. § 522(d)(2)			
	Line from Schedule A/B. 3.2			100% of fair market value, up to any applicable statutory limit				
	household goods, furnishings, appliances, audio-video, computer	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(3)			
	equip Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				
	debtor clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)			
	Line from Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit				
	wedding ring Line from Schedule A/B: 12.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(4)			
	Line from Scriedule A/D. 12.1			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

GW Todd Fulfer Debtor 1 Samantha A. Fulfer Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B retirement--Oregon Savings Growth 11 U.S.C. § 522(d)(12) \$150.00 \$150.00 Plan: State of Oregon--Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit federal: 2018 federal income tax 11 U.S.C. § 522(d)(5) \$3,119.00 \$3,119.00 refunds expected Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit child support: child support owed by 11 U.S.C. § 522(d)(10)(D) \$3,200.00 \$3,800.00 Thomas L. German Line from Schedule A/B: 29.1 100% of fair market value, up to any applicable statutory limit preferential garnishments within 90 11 U.S.C. § 522(d)(5) \$1,221.00 \$1,221.00 days of filing by Heritage Grove **Federal Credit Union** 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 35.1 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this informa	ation to identify you	r 0350:			
		i case.			
Debtor 1	GW Todd Fulfer	Middle Name Last Nan	ne	-	
Debtor 2	Samantha A. Fu				
(Spouse if, filing)	First Name	Middle Name Last Nan	ne	-	
United States Bank	kruptcy Court for the:	DISTRICT OF OREGON			
Coopenimber					
Case number				☐ Check	if this is an
				amend	led filing
Official Forms	10CD				
Official Form		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
Schedule L): Creditors	Who Have Claims Secu	red by Propert	У	12/15
		f two married people are filing together, both a out, number the entries, and attach it to this fo			
` ,	ave claims secured by	your property?			
	•	nis form to the court with your other schedule	es. You have nothing else t	to report on this form.	
_	all of the information I	·	3 200	,	
	Secured Claims	35.04.			
				Column B	Column C
for each claim. If mor	re than one creditor has	a particular claim, list the other creditors in Part 2	. As Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alphabetic		cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Neill's Whe	els	Describe the property that secures the claim:	\$6,000.00	\$6,000.00	\$0.00
Creditor's Name		2002 Dodge Ram 2500 2000,000 miles			
US 65 Ross	s Lane	As of the date you file, the claim is: Check all the	at		
Eugene, Of		apply. Contingent			
Number, Street, C	City, State & Zip Code	☐ Unliquidated			
M/h a asses the deb	*2 O	Disputed			
Who owes the deb	T? Check one.	Nature of lien. Check all that apply.			
Debtor 2 only		 An agreement you made (such as mortgage car loan) 	or secured		
■ Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)		
☐ At least one of the	•	☐ Judgment lien from a lawsuit			
☐ Check if this clai		Other (including a right to offset)			
community debt	!				
Date debt was incur	red	Last 4 digits of account number			
2.2 Toyota Mat	tor Cradit Carn	Describe the property that accurace the claim	\$24,000,00	\$20,000,00	¢4 000 00
2.2 Toyota Mot Creditor's Name	tor Credit Corp	Describe the property that secures the claim: 2018 Toyota Rav4 26,000 miles	\$24,000.00	\$20,000.00	\$4,000.00
		2010 1090ta Nav4 20,000 1111100			
5005 N Rive		As of the date you file, the claim is: Check all the			
Cedar Rapi 52411-6634		apply.			
	City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Number, Street, C	ony, state & zip code	☐ Disputed			
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage	or secured		
Debtor 2 only		car loan)			
Debtor 1 and Deb		☐ Statutory lien (such as tax lien, mechanic's lie	en)		
_	e debtors and another	Judgment lien from a lawsuit			
☐ Check if this clai community debt		Other (including a right to offset)			
	rod 11/2017	Last 4 digits of account number 40	100		

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1	GW Todd Fulfer			Case number (if known)	
•	First Name	Middle Name	Last Name		
Debtor 2	Samantha A. Fulfo	er			
	First Name	Middle Name	Last Name		

Add the dollar value of your entries in Column A on this page. Write that number here:	\$30,000.00
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:	\$30,000.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in	this inform	nation to identify your o	ase:				
Debto	or 1	GW Todd Fulfer					
	_	First Name	Middle Name	Last Name	_		
Debto	or 2 e if, filing)	Samantha A. Fulfe	Middle Name	Last Name			
	, 0,						
Unite	d States Bar	nkruptcy Court for the:	DISTRICT OF OREGO	N			
Case	number						
(if know	/n)					☐ Check	if this is an
						amend	ed filing
∩ffic	rial Form	n 106E/F					
			ho Have Unseci	urod Claime			12/15
				PRIORITY claims and Part 2) for graditors with NON	DDIODITY eleime Li	
any ex Schedi Schedi left. At	ecutory contr ule G: Execut ule D: Credito tach the Cont	racts or unexpired leases tory Contracts and Unexpi ors Who Have Claims Secu	that could result in a claim red Leases (Official Form 1 ired by Property. If more sp	. Also list executory contra 106G). Do not include any o pace is needed, copy the P on to report in a Part, do no	acts on Schedule A/B: P creditors with partially s art you need, fill it out, r	roperty (Official For ecured claims that a number the entries in	m 106A/B) and on ire listed in in the boxes on the
Part 1		l of Your PRIORITY Un	secured Claims				
		rs have priority unsecured					
	No. Go to Pa						
	Yes.						
2. Li	st all of your entify what typ ossible, list the	pe of claim it is. If a claim hate claims in alphabetical orde	s both priority and nonpriority	one priority unsecured claim, y amounts, list that claim here name. If you have more than editors in Part 3.	e and show both priority a	nd nonpriority amount	ts. As much as
		·		rm in the instruction booklet.)			
					Total claim	Priority amount	Nonpriority amount
2.1	Internal	Revenue Service	Last 4 digits o	f account number	\$0.00	\$0.00	\$0.00
		editor's Name					
	PO Box			debt incurred?			
		lphia, PA 19101-7346 reet City State Zip Code		you file, the claim is: Chec	k all that apply		
,		I the debt? Check one.	☐ Contingent	, ,	··· -···		
I	Debtor 1 or	nly	☐ Unliquidated	Ч			
	Debtor 2 or		☐ Disputed	u			
	_	nd Debtor 2 only	·	RITY unsecured claim:			
	_	•		upport obligations			
	_	e of the debtors and anothe	•				
		his claim is for a commun	•	certain other debts you owe the	•		
-	s the claim s ■ No	ubject to offset?		. , ,	you were intoxicated		
	■ No □ Yes		Other. Spec	precationary			
	— 103			productionary			
2.2	ODR Bk	су	Last 4 digits o	f account number	\$645.00	\$645.00	\$0.00
	955 Cen	editor's Name Iter NE #353 OR 97301-2555	When was the	debt incurred?			
		reet City State Zip Code	As of the date	you file, the claim is: Chec	k all that apply		
1	Who incurred	I the debt? Check one.	☐ Contingent				
	Debtor 1 or	nly	☐ Unliquidated	d			
l	Debtor 2 or	nly	□ Disputed				
	Debtor 1 a	nd Debtor 2 only	•	RITY unsecured claim:			
		e of the debtors and anothe	Domestic sı	upport obligations			
	_	his claim is for a commun	•	certain other debts you owe t	he government		
		nis ciaim is for a commun ubject to offset?	•	death or personal injury while	-		
	No No	,	Other. Spec		, II noto intollocator		
	— No П vos		□ Other. Spec	state income tax	evnected to be ow	ing for 2019	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 8

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

52349

Best Case Bankruptcy

Debto Debto	r 1 GW Todd Fulfer r 2 Samantha A. Fulfer	Case number (if known)				
2.3	ODR Bkcy	Last 4 digits of account number \$2,000.00	\$2,000.00 \$0.00			
	Priority Creditor's Name 955 Center NE #353 Salem, OR 97301-2555	When was the debt incurred?	<u> </u>			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
٧	Vho incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:				
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government				
ls	s the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated				
	No	☐ Other. Specify				
	☐Yes	2017 form 40 state income tax				
4. Lis	secured claim, list the creditor separately for each cl	alphabetical order of the creditor who holds each claim. If a creditor has aim. For each claim listed, identify what type of claim it is. Do not list claims a creditors in Part 3.If you have more than three nonpriority unsecured claims	already included in Part 1. If more			
4.1	Bonneville Collections	Last 4 digits of account number 2616	\$375.00			
	Nonpriority Creditor's Name 6026 Fashion Point Drive South Ogden, UT 84403 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,				
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a separation agreement or divorce that you	u did not			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
	■ No					
	☐ Yes	■ Other. Specify collection assignee, PGE				

	GW Todd Fulfer Samantha A. Fulfer	Case number (if known)			
4.2	Caine & Weiner	Last 4 digits of account number	\$117.00		
	Nonpriority Creditor's Name 5805 Sepulveda Blvd 4th Floor Van Nuys, CA 91411	When was the debt incurred?	*******		
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify collection assignee, Progressive Insurance			
4.3	Chase Card Services	Last 4 digits of account number	\$2,000.00		
	Nonpriority Creditor's Name PO Box 15298 Wilmington, DE 19850-5298	When was the debt incurred?			
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify credit card			
4.4	Discover Financial Services LLC Nonpriority Creditor's Name	Last 4 digits of account number 3669	\$8,500.00		
	PO Box 15316 Wilmington, DE 19850-5316	When was the debt incurred?			
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify credit card			

Samantha A. Fulfer	Case number (if known)	
Enhanced Recovery Company	Last 4 digits of account number 1864	\$178.00
Nonpriority Creditor's Name PO Box 57547	When was the debt incurred?	
Jacksonville, FL 32241	Their was the dest incurred.	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify collection assignee, T-Mobile	
Harley Davidson Credit	Last 4 digits of account number 2824	\$1,075.00
Nonpriority Creditor's Name	<u></u>	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3850 Arrowhead Dr	When was the debt incurred?	
Carson City, NV 89706 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	·	
	☐ Disputed Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify repossessed vehicle, 11-2018	
Haritana Oraca Fadanal Oradit		
Heritage Grove Federal Credit Union	Last 4 digits of account number 9422	\$0.00
Nonpriority Creditor's Name 631 Winter Street NE Salem, OR 97301	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	judgment of 1-29-2019, Heritage Grove	

☐ Yes

Other. Specify Marion County Circuit Court No. 18SC49422

Debtor 1 Debtor 2	GW Todd Fulfer Samantha A. Fulfer	Case number (if known)				
	Linn County Federal Credit Union	Last 4 digits of account number 5700	\$14,000.00			
	Nonpriority Creditor's Name 1428 Main Street Sweet Home, OR 97386	When was the debt incurred?				
_	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify charged off auto loan				
	ODR Bkcy	Last 4 digits of account number	\$4,300.00			
g	Nonpriority Creditor's Name 955 Center NE #353 Salem, OR 97301-2555	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify 2015 state income tax				
4.1	SW Credit Systems L.P.	Last 4 digits of account number 6852	\$124.00			
	Nonpriority Creditor's Name 4120 International Parkway Ste	When was the debt incurred?				
	1100 Carrollton, TX 75007	_				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	П				
	_	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify collection assignee, Comcast				

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor Debtor	1 GW Todd Fulfer 2 Samantha A. Fulfer	Case number (if known)	
4.1 1	Toyota Motor Credit Corp	Last 4 digits of account number 8813	\$6,500.00
	Nonpriority Creditor's Name 5005 N River blvd NE Cedar Rapids, IA 52411-6634	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Charged off auto loanrepossessed vehicle 8-2018	
4.1	Verizon Wireless	Last 4 digits of account number 5230	\$2,013.00
	Nonpriority Creditor's Name PO Box 650051 Dallas, TX 75265	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify telecommunications	
4.1	Village East Courts, LLC	Last 4 digits of account number	\$3,052.00
	Nonpriority Creditor's Name c/o Wil L. Wilson, R.A. 17900 Mallard SE	When was the debt incurred?	
	Dayton, OR 97114	_	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	claimed damages to rental unit at 862 ■ Other. Specify Denver Place NE, Salem OR 97301	

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 Debtor 2		d Fulfer na A. Fulfer		Case nu	umber (if known)	
4.1	Navpoint	Resource Group LLC	Last 4 digits of account numbe	sr 5605	<u></u>	\$248.00
	Nonpriority Cr	editor's Name	When was the debt incurred?			
		ck, TX 78683 t City State Zip Code	As of the date you file, the clai	m is: Check	k all that apply	
V	Who incurred	I the debt? Check one.				
ı	Debtor 1 o	nly	☐ Contingent			
[Debtor 2 o	nly	☐ Unliquidated			
[Debtor 1 a	nd Debtor 2 only	☐ Disputed			
[At least on	e of the debtors and another	Type of NONPRIORITY unsecu	red claim:		
[☐ Check if the	his claim is for a community	☐ Student loans			
	lebt s the claim s	ubject to offset?	Obligations arising out of a se report as priority claims	eparation ag	greement or divorce that you did n	ot
ı	No		Debts to pension or profit-sha	aring plans,	and other similar debts	
Γ	☐Yes		Other. Specify collection	nComc	ast	
Part 3:	List Othe	rs to Be Notified About a D	Debt That You Already Listed			
5. Use this is trying have m	s page only it g to collect fr ore than one	you have others to be notified om you for a debt you owe to	d about your bankruptcy, for a debt tha someone else, list the original creditor hat you listed in Parts 1 or 2, list the ac	r in Parts 1	or 2, then list the collection age	ency here. Similarly, if you
Name and			On which entry in Part 1 or Part 2 did y	ou list the o	original creditor?	
		Technology, Inc.	Line 4.9 of (Check one):	Line 4.9 of (Check one):		Claims
	15633095- usiness Pa			Part 2:	Creditors with Nonpriority Unsecu	red Claims
	field, CA 9					
	•		Last 4 digits of account number	12	231	
Name and		4.0.0	On which entry in Part 1 or Part 2 did y		•	
	ude & Feli W First Av		Line 4.4 of (Check one):		Creditors with Priority Unsecured	
	d, OR 972			Part 2:	Creditors with Nonpriority Unsecu	red Claims
			Last 4 digits of account number	0	506	
Name and			On which entry in Part 1 or Part 2 did y	ou list the o	original creditor?	
-	East Coul	rts	Line <u>4.13</u> of (<i>Check one</i>):	☐ Part 1:	Creditors with Priority Unsecured	Claims
PO Box	(171 , OR 9711	4		Part 2:	Creditors with Nonpriority Unsecu	red Claims
Dayton		-	Last 4 digits of account number			
Part 4:	Add the	Amounts for Each Type of	Unsecured Claim			
	e amounts o unsecured c		laims. This information is for statistica	I reporting	j purposes only. 28 U.S.C. §159.	Add the amounts for each
					Total Claim	
	6a	. Domestic support obligation	ons	6a.		.00
	otal					
clai from Par		. Taxes and certain other de	bts you owe the government	6b.	\$ 2,645.	.00
	6c	. Claims for death or person	al injury while you were intoxicated	6c.		.00
	6d	. Other. Add all other priority u	insecured claims. Write that amount here	. 6d.	\$ 0.	.00
	6e	. Total Priority. Add lines 6a t	hrough 6d.	6e.	\$ 2,645.	.00
	6f.	Student loans		6f.	Total Claim 0.	.00
To	oi.			J	Ψ	.00

from Part 2

Official Form 106 E/F

claims

Schedule E/F: Creditors Who Have Unsecured Claims

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

Other. Add all other nonpriority unsecured claims. Write that amount

you did not report as priority claims

Page 7 of 8

6i.

0.00

0.00

42,482.00

6g.

6h.

GW Todd Samantha	Fulfer a A. Fulfer	Case nur	mber (if known)		
	here.				
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	42,482.00	

Fill in this infor	mation to identify your	case:		
Debtor 1	GW Todd Fulfer			
	First Name	Middle Name	Last Name	
Debtor 2	Samantha A. Fulf	er		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON		
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for			
2.1								
	Name							
	Number	Street			_			
	City		State	ZIP Code	<u> </u>			
2.2								
	Name							
	Number	Street						
	City		State	ZIP Code	_			
2.3	,							
	Name							
	Number	Street						
	City		State	ZIP Code	_			
2.4	,							
	Name				<u> </u>			
	Number	Street			<u> </u>			
	City		State	ZIP Code	<u> </u>			
2.5	,			2 0000				
	Name				_			
	Number	Street			<u> </u>			
	City		State	ZIP Code	<u> </u>			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Fill in this	information to identify yo	our case:			
Debtor 1	GW Todd Fulfe	er			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	Samantha A. F	ulfer Middle Name	Last Name		
	3,				
United Sta	tes Bankruptcy Court for the	e: DISTRICT OF OREGO	DIN		
Case numb	ber				
(if known)				☐ Check if this is an amended filing	
Official	l Form 106H				
Sched	lule H: Your Co	debtors		12/15	
		vn). Answer every question (If you are filing a joint case,		as a codebtor.	
■ No □ Yes	S				
		you lived in a community p na, Nevada, New Mexico, P		ry? (Community property states and territories include ington, and Wisconsin.)	
	Go to line 3. Did your spouse, former s	pouse, or legal equivalent liv	ve with you at the time?		
in line Form	2 again as a codebtor on	ly if that person is a guara	ntor or cosigner. Make s	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 16G). Use Schedule D, Schedule E/F, or Schedule G to fi	ı
	Column 1: Your codebtor Name, Number, Street, City, State an	nd ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
				O O A A A A A A A A A A A A A A A A A A	-
3.2	Name			□ Schedule D, line □ Schedule E/F, line	
				☐ Schedule C,I , line	
-	Number Street			_	
	City	State	ZIP Code		

Fill	in this information t	o identify your ca	se:					1				
Del	btor 1	GW Todd Fu	lfer									
	btor 2 buse, if filing)	Samantha A.	Fulfer				_					
Uni	ited States Bankrup	tcy Court for the:	DISTRICT OF OREGO	ON								
	se number nown)									d filing ent shov	ving postpetition	
\cap	fficial Form	1061									e following date:	
	chedule I:		ome					ı	MM / DD/ Y	YYY		12/15
sup spo atta	plying correct info	ormation. If you a parated and your	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointl th you,	y, and your s do not includ	spouse de infor	is liv mati	ing witl on abοι	n you, inclu It your spo	ude info ouse. If	ormation about more space is	your needed,
1.	Fill in your emplinformation.	oyment		Debto	or 1				Debtor 2	or nor	n-filing spouse	
	If you have more attach a separate		Employment status	■ Em	nployed				■ Emplo	oyed		
	information about employers.			☐ No	t employed				☐ Not er	. ,		
	Include part-time,	seasonal, or	Occupation	Sanit	tation Lead				Employ	ment	Specialist	
	self-employed wo		Employer's name	Pacif	ic Seafood	-Newp	ort L	LC	State of	Orego	on DAS	
	Occupation may i or homemaker, if		Employer's address		SW Bay Blv port, OR 97				155 Cot Salem,			
Pal	rt 2: Give De	tails About Mon	How long employed the	nere?	3 mo				_2	yrs		
Esti spo	imate monthly incouse unless you are	ome as of the da separated. spouse have mo	te you file this form. If y		, and the second				r that perso	n on the	ŕ	J
											filing spouse	
2.			y, and commissions (be alculate what the monthly			2.	\$;	3,100.00	\$	3,148.00	
3.	Estimate and list	t monthly overti	me pay.			3.	+\$		0.00	+\$_	0.00	
4.	Calculate gross	Income. Add line	e 2 + line 3.			4.	\$	3,1	00.00	\$	3,148.00	

Case number (if known)

7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,440.00 \$ 2,260.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$ 0.00 \$ 0.00 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 350.00 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 8e. \$ 0.00 \$ 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8g. \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 8h. + \$ 0.00 8h. + \$ 0.00 8h. + \$ 0.00 8c. Social Security 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9						For	Debtor 1		Debtor 2		
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5b. S. 0.00 \$ 0.00 5b. Mandatory contributions for retirement plans 5c. \$ 0.00 \$ 50.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 50.00 5d. Required repayments of retirement fund ions 5d. \$ 0.00 \$ 265.00 5d. Required repayments of retirement fund ions 5d. \$ 0.00 \$ 265.00 5d. Required repayments of retirement fund ions 5d. \$ 0.00 \$ 265.00 5d. Domestic support obligations 5f. \$ 0.00 \$ 265.00 5d. Domestic support obligations 5f. \$ 0.00 \$ 265.00 5d. Uhion dues 5d. \$ 0.00 \$ 56.00 5d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6 \$ 660.00 \$ 56.00 5d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6 \$ 5g. \$ 0.00 \$ 56.00 5d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6 \$ 5g. \$ 0.00 \$ 2,260.00 5d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6 \$ 5g. \$ 0.00 \$ 2,260.00 5d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6 \$ 5g. \$ 0.00 \$ 2,260.00 5d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7 5g. \$ 2,440.00 \$ 2,260.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5g+5f+5g+5h. 7 5g. \$ 2,440.00 \$ 2,260.00 8d. List all other income regularly receives. 8a. \$ 0.00 \$ 0.00 8d. List all other income regularly receives 8b. \$ 0.00 \$ 0.00 8d. \$ 0.00 \$ 0.00 8d. \$ 0.00 \$ 0.00 9d. \$		Сору	line 4 here		4.	\$	3,100.00				
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5b. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5d. Sc. Voluntary contributions for retirement fund loans 5d. Sc. Voluntary contributions for voluntary contributions to the expenses and the total contributions for voluntary contributions to the value (if known) of any non-cash assistance has voluntary contributions for a soft of stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Social Security 8c. Social Security 8d. Other government assistance that you requisity receive include cash assistance and the value (if known) of any non-cash assistance has voluntary contributions for an automatic patter, members of your household, your dependents, your roommates, and other regular contributions to the expenses that you list in Schedulo J. Conditional contributions to the expenses that you list in Schedulo J. Condit	5	l ist :									
55. Mandatory contributions for retirement plans 56. Voluntary contributions for retirement plans 57. Voluntary contributions for retirement plans 58. Required repayments of retirement fund loans 58. Insurance 58. \$ 0.00 \$ 0.00 59. 0.00 59. 0.00 59. 0.00 59. 0.00 50. 0.00	0.				53	•	660.00	¢		17 00	
5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. So. 0.00 5e. Insurance 5d. \$0.000 \$0.000 \$1f. \$0.0000 \$0.000 \$0.0000 \$0.0000 \$0.0000 \$0.0000 \$0				•					•		
5d. Required repayments of retirement fund loans 5e. Insurance 5e. Insurance 5e. Insurance 5e. Insurance 5f. Domestic support obligations 5f. \$ 0.000 \$ 0.00 5g. Union dues 5g. Union dues 5g. \$ 0.000 \$ 0.00 5g. Union dues 6g. Union dues 6g. \$ 0.000 \$ 0.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 8888.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 8888.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 8888.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 8888.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 2,260.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 2,260.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 2,260.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 2,260.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 2,260.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 2,260.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 2,260.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 0.00 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 8. \$ 0.00 \$ 0.00 6d. Add lines 5a+5b+5c+5d+5d+5g+5d			•	•		· —		· —			
5e. Insurance 5e. S 0.00 \$ 265.00 5f. Domestic support obligations 5f. S 0.00 \$ 0.00 5g. Union dues 5g. S 0.00 \$ 56.00 5h. Other deductions. Specify: 5h. V \$ 0.00 \$ 56.00 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 888.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,440.00 \$ 2,260.00 8. Net income from rental property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business. S 0.00 \$ 0.00 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrifion Assistance Program) or housing subsidies. Specify: 8c. \$ 0.00 \$ 0.00 8d. \$ 0.00 \$ 0.00 9d. \$ 0			-	•		· —		· —			-
5. Domestic support obligations 5. Union dues 5. Union du				monto or romoment rana round		· · —			-		
5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 8888.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,440.00 \$ 2,260.00 8. List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business showing gross receipts, ordinary and necessary business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 350.00 8c. Social Security 8c. \$ 0.00 \$ 350.00 8c. Social Security 8c. \$ 0.00 \$ 0.00 8c. \$ 0.00 \$ 0.00 8c. Social Security 8c. \$ 0.00 \$ 0.00 8c. \$ 0.00 \$ 0.00 8c. Social Security 8c. \$ 0.00 \$ 0.00 8c. Social Security 8c. \$ 0.00 \$ 0.00 8c. Social Security 8c. \$ 0.00 \$ 0.00 8c. So				ort obligations		· · —		· —			
Sh. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 660.00 \$ 8888.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,440.00 \$ 2,260.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 350.00 8d. \$ 0.00 \$ 0.00 8e. Social Security 8f. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8g. Pension or retirement income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9g. \$ 0.00 \$ 0.00 8g. Pension or retirement income. Specify: 8g. \$ 0.00 \$ 0.00 8g. Pension or retirement income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9g. \$ 0.00 \$ 0.00 10. \$ 2,440.00 \$ \$ 2,610.00 11. \$ 2,440.00 \$ \$ 2,610.00 12. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 12. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 12. Specify: 13. Do you expect an increase or decrease within the year after you file this form?						· · —		· —			
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,440.00 \$ 2,260.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.00 8c. Social Security 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 8e. \$ 0.00 \$ 0.00 8e. Social Security 8e. \$ 0.00 \$ 0.00 9e. Social Security 8e. \$ 0.00 \$ 0.00 9e. Social Security 8e. \$ 0.00 \$ 0.00 10e Security of the property of the support of the supplemental Nutrition Assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 9e. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 10. \$ 0.00 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your d		-		ns. Specify:		· -		: —			•
 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,440.00 \$ 2,260.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm. Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$ 0.00 \$ 0.00 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive linctude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 350.00 8d. Unemployment compensation 8c. \$ 0.00 \$ 0.00 8e. \$ 0.00 \$ 0.00 8f. Other government assistance that you regularly receive linctude cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8h. \$ 0.00 \$ 0.00 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 350.00 9. Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$ 0.00 2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summery of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 2. \$ 5,050.00 2. 5,050.00 3. 5,050.00 	6.	Add !			6.	\$		_	8		•
8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly income. Add dine 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 350.00 8e. \$ 0.00 \$ 0.00 8e. \$ 0.00 \$ 0.00 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 350.00 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 350.00 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	7.			, and the second	7.	\$		\$			•
8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 350.00 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. \$g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 350.00 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or reliatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 14. \$ 5,050.00 Combined monthly income.	8.	List a	Net income from profession, or f Attach a statemer receipts, ordinar	regularly received: n rental property and from operating a business, arm ent for each property and business showing gross y and necessary business expenses, and the total	8a.	· —		\$			•
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 350.00 8e. Social Security 8e. \$ 0.00 \$ 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 350.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 5,050.00 Combined monthly income.		8b.	•			\$					
8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 350.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 4\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 5,050.00 Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form?		8c.	regularly receive Include alimony,	e spousal support, child support, maintenance, divorce		\$	0.00	\$	3	350.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 350.00 9. Add all other income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 5,050.00 Combined monthly income		8d.	Unemployment	compensation	8d.	\$	0.00	\$		0.00	•
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 350.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. No.		8e.	Social Security		8e.	\$	0.00	\$		0.00	•
8h. Other monthly income. Specify: 8h.+ \$ 0.00 + \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 350.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income No.			Include cash ass that you receive, Nutrition Assista Specify:	sistance and the value (if known) of any non-cash assista such as food stamps (benefits under the Supplemental nce Program) or housing subsidies.	8f.	· —					
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 350.00 \$ 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form? No.		-			_	· · —		· · —			=
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No.		OII.	Other monthly	mcome. Specify.		Ψ_	0.00	· <u>Ψ</u> –		0.00	
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form? No.	9.	Adda	all other income.	Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_		350.00	
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form? No.	10.	Calcı	ulate monthly inc	come. Add line 7 + line 9.	10. \$	•	2.440.00 + \$	2.	610.00	= \$	5.050.00
 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 5,050.00 Combined monthly income No. 			•				-,			-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 5,050.00 Combined monthly income No.	11.	State Include other Do no	e all other regular de contributions fr friends or relative ot include any amo	r contributions to the expenses that you list in Schedom an unmarried partner, members of your household, yes.	our depen						0.00
13. Do you expect an increase or decrease within the year after you file this form? No.	12.	Write	that amount on th							\$	5,050.00
13. Do you expect an increase or decrease within the year after you file this form? No.											
Yes. Explain:	13.	Do yo	•	rease or decrease within the year after you file this fo	orm?						, moonie
			Yes. Explain:								

Fill	in this informat	tion to identify yo	ur case:						
Deb	tor 1	GW Todd Fu	lfer					this is:	
	otor 2 ouse, if filing)	Samantha A.	Fulfer				_] As		ving postpetition chapter the following date:
		untey Court for the:	DISTRI	CT OF OREGON			MN	// DD / YYYY	
		upicy Court for the.	DISTIN	CT OF ORLGON			IVIIV	11/00/1111	
l	e number nown)								
	fficial Fo								
So	chedule	J: Your I	Exper	ises					12/1
info	ormation. If m		eded, atta	ch another sheet to	ole are filing togethe this form. On the to				
		ibe Your House	hold						
1.	Is this a join								
	□ No. Go to								
		s Debtor 2 live i	n a separ	ate household?					
	■ No	_	t file Offici	al Form 106J-2, <i>Expe</i>	enses for Separate Ho	ousehold of D	ebtor	2.	
2.	Do you have	e dependents?	□ No						
	Do not list De Debtor 2.		Yes.	Fill out this information each dependent	•		•	Dependent's age	Does dependent live with you?
	Do not state	the							□ No
	dependents i	names.			Daughter			7	■ Yes
					Daughter			12	□ No ■ Yes
									□ No
									☐ Yes
									□ No
2	De veur evm	anaaa inaluda	_						☐ Yes
3.	expenses of	enses include f people other th d your depender	nan ┌	No Yes					
Est exp	imate your ex		our bankr	uptcy filing date unl					apter 13 case to report f the form and fill in the
the		n assistance and		government assista luded it on <i>Schedu</i> l				Your expe	enses
4.	The rental o	r home ownersl	hip expen	ses for your resider	nce. Include first morto	gage			000.00
	payments an	d any rent for the	e ground o	r lot.		4.	. \$ _		900.00
	If not includ	ed in line 4:							
	4a. Real e	state taxes				4a.	. \$		0.00
		rty, homeowner's					. \$ _		0.00
				ipkeep expenses			. \$ _		0.00
5.		owner's associati nortgage payme			as home equity loans		. \$. \$		0.00 0.00
٠.		יווינטיק בפיינייי			and the second ordered	0.	-		0.00

Debtor 1 Debtor 2	GW Todo Samanth		Case num	aber (if known)	
6. Util	ities:				
6a.		heat, natural gas	6a.	\$	0.00
6b.		ver, garbage collection	6b.	\$	0.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	250.00
6d.	Other. Spe		6d.	\$	0.00
7. Fo c		ekeeping supplies		\$	950.00
		hildren's education costs	8.	\$	100.00
9. Clo	thing, laund	ry, and dry cleaning	9.	\$	250.00
	•	roducts and services	10.	\$	75.00
11. M ed	dical and der	ntal expenses	11.	\$	200.00
		Include gas, maintenance, bus or train fare.		*	
	not include ca	5 ,	12.	\$	500.00
13. Ent	ertainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14. Cha	aritable cont	ributions and religious donations	14.	\$	0.00
15. Ins i	urance.				
		surance deducted from your pay or included in lines 4 or 20.			
	. Life insura		15a.		0.00
15b	. Health ins	urance	15b.	\$	0.00
15c	. Vehicle ins	surance	15c.	\$	200.00
15d	. Other insu	rance. Specify:	15d.	\$	0.00
16. Tax	es. Do not in	clude taxes deducted from your pay or included in lines 4 or 20.			
Spe	ecify:		16.	\$	0.00
		ease payments:			
17a	. Car payme	ents for Vehicle 1	17a.	\$	384.00
17b	. Car payme	ents for Vehicle 2	17b.	\$	800.00
17c	. Other. Spe	ecify:	17c.	\$	0.00
17d	. Other. Spe	ecify:	17d.	\$	0.00
		of alimony, maintenance, and support that you did not report as		•	0.00
		your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· <u> </u>	0.00
		s you make to support others who do not live with you.		\$	0.00
	ecify:		19.	_	
		erty expenses not included in lines 4 or 5 of this form or on Sched			
	0 0	on other property	20a.	· -	0.00
	. Real estat		20b.	·	0.00
		nomeowner's, or renter's insurance		·	0.00
		ce, repair, and upkeep expenses	20d.	·	0.00
20e	. Homeown	er's association or condominium dues	20e.		0.00
21. Oth	er: Specify:	Pet Expense	21.	+\$	100.00
Chi	ristmas & E	Birthday Gifts		+\$	50.00
Gy	m members	ship		+\$	100.00
	. payment o	•		+\$	50.00
	-	monthly expenses			
	. Add lines 4	<u> </u>		\$	5,009.00
22b	. Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c	. Add line 22a	a and 22b. The result is your monthly expenses.		\$	5,009.00
23. Cal	culate your r	monthly net income.			
		12 (your combined monthly income) from Schedule I.	23a.	\$	5,050.00
		monthly expenses from line 22c above.	23b.	-\$	5,009.00
	, , ,				
23c	•	our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	41.00
Formod	example, do yo lification to the	an increase or decrease in your expenses within the year after you be expect to finish paying for your car loan within the year or do you expect your naterms of your mortgage?			e or decrease because of a
	No.	[=			
	Yes.	Explain here:			

Fill in this inform	nation to identify your	case:		
Debtor 1	GW Todd Fulfer			
	First Name	Middle Name	Last Name	
Debtor 2	Samantha A. Ful			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF OREGON	<u> </u>	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Form	n 106Dec			
Declarat	ion Ahout a	an Individual	Debtor's Schedules	40/45
Declarat	ion About 8	an marviduai	Debtor 3 Octreduces	12/15
_			nsible for supplying correct information.	
			or amended schedules. Making a false s ruptcy case can result in fines up to \$250	
	B U.S.C. §§ 152, 1341,		ruptoy case can result in fines up to \$250	5,000, or imprisonment for up to 20
Sign	n Below			
Did you pay	v or agree to hav some	one who is NOT an attor	ney to help you fill out bankruptcy forms	2
Diu you pay	y or agree to pay some	cone who is NOT an attori	ley to help you hill out bankruptcy forms	•
■ No				
□ Yes N	lame of person		Attach F	Bankruptcy Petition Preparer's Notice,
				tion, and Signature (Official Form 119)
Under nenel	tu of porium, I doolore	that I have road the cumr	more and cohodulas filed with this dealer	ation and
•	e true and correct.	tilat i liave reau tile Suilli	mary and schedules filed with this declar	ation and
•				
	Todd Fulfer		X /s/ Samantha A. Fulfer	
	dd Fulfer e of Debtor 1		Samantha A. Fulfer Signature of Debtor 2	
Signatur	e oi Denioi I		Signature of Debtor 2	
Date 🖊	April 7, 2019		Date April 7, 2019	
_	• /			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

Fill in this infor	mation to identify you	r case:			
Debtor 1	GW Todd Fulfer				
Debtor 2	First Name Samantha A. Fu	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF OREGON			
Case number					
(if known)				_	Check if this is an amended filing
000 : 15	407				
Official Fo		Affairs for Individ	luals Filing for B	ankruntev	4/19
		ible. If two married people a			
information. If I		attach a separate sheet to t			
	,		Lived Before		
Part 1: Give	Details About Your Ma	arital Status and Where You	Lived Before		
1. What is you	ır current marital statı	ıs?			
■ Marrie	d				
☐ Not ma	arried				
2. During the	last 3 years, have you	lived anywhere other than v	where you live now?		
□ No					
Yes. L	st all of the places you	ived in the last 3 years. Do no	ot include where you live nov	٧.	
Debtor 1 F	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
862 Denv Salem, O		From-To: prior to 10-1-2	O18 Same as Debtor	1	Same as Debtor 1 From-To:
states and territo ■ No □ Yes. M	<i>rie</i> s include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev medule H: Your Codebtors (Of Ir Income	/ada, New Mexico, Puerto R		
Fill in the to	al amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	III businesses, including part	-time activities.	endar years?
□ No					
Yes. F	II in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	l of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$8,956.00	■ Wages, commissions, bonuses, tips	\$14,330.00
		☐ Operating a business		☐ Operating a business	
Official Form 107		Statement of Financial Affa	airs for Individuals Filing for B	ankruptcy	page 1

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

page 1

			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	st calenda ry 1 to D	ar year: ecember 31, 2018	■ Wages, commissions, bonuses, tips	\$7,690.00	■ Wages, commissions, bonuses, tips	\$32,143.00
			☐ Operating a business		☐ Operating a business	
		ar year before that: ecember 31, 2017		\$39,302.00	■ Wages, commissions, bonuses, tips	\$21,945.00
			☐ Operating a business		☐ Operating a business	
wir	nnings. If y t each so No	you are filing a joint	nts; pensions; rental income; intercase and you have income that yncome from each source separa	you received together, list it o	nly once under Debtor 1.	
			Sources of income Describe below.	Gross income from each source (before deductions and	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
				exclusions)		
		l of current year ui ed for bankruptcy:	ntil	exclusions) \$0.00	Child Support	\$1,260.0
he dat	te you file	ed for bankruptcy:	Unemployment	,	Child Support	\$1,260.0
he dat	te you file	ed for bankruptcy: ar year:	Unemployment	\$0.00	Child Support Child Support	\$1,260.0 \$2,100.0
For the	te you file st calenda ry 1 to Do	ed for bankruptcy: ar year:	Unemployment	\$0.00 \$13,754.00		
For lass Janua For the Janua Part 3:	e calenda ery 1 to De List C	ar year: ecember 31, 2018 ar year before that: ecember 31, 2017 Certain Payments Y Debtor 1's or Debtor Neither Debtor 1 no	Unemployment	\$0.00 \$13,754.00 \$0.00 \$0.00 Bankruptcy r debts? umer debts. Consumer debts. Id purpose."	Child Support Child Support	\$2,100.0 \$4,490.0
For lass Janua For the Janua Part 3:	e calenda ry 1 to Do List C e either D No. N	ar year before that: ecember 31, 2018 ar year before that: ecember 31, 2017 Certain Payments Y Debtor 1's or Debtor Neither Debtor 1 no individual primarily for During the 90 days to During the 90 days to A yes List below paid that not included.	Unemployment You Made Before You Filed for part 2's debts primarily consumer or Debtor 2 has primarily consumer a personal, family, or househousefore you filed for bankruptcy, di	\$13,754.00 \$13,754.00 \$0.00 \$0.00 Bankruptcy r debts? Jumer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,825* or more intention to the composition of the com	Child Support Child Support s are defined in 11 U.S.C. § 10 of \$6,825* or more? n one or more payments and ations, such as child support	\$2,100.0 \$4,490.0 01(8) as "incurred by a the total amount you and alimony. Also, do
For lass Janua For the Janua Part 3:	te you file at calenda ary 1 to Do List C e either D No. N ii	ar year: ecember 31, 2018 ar year before that: ecember 31, 2017 Certain Payments Y Debtor 1's or Debtor Neither Debtor 1 no individual primarily for During the 90 days become the second of the secon	Unemployment You Made Before You Filed for or 2's debts primarily consumer or Debtor 2 has primarily consumer or a personal, family, or househor pefore you filed for bankruptcy, di ne 7. ow each creditor to whom you pai t creditor. Do not include payment and payments to an attorney for the	\$13,754.00 \$13,754.00 \$0.00 \$0.00 Bankruptcy r debts? umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,825* or more into for domestic support oblighis bankruptcy case. s after that for cases filed on umer debts.	Child Support Child Support s are defined in 11 U.S.C. § 10 I of \$6,825* or more? In one or more payments and ations, such as child support or after the date of adjustments.	\$2,100.0 \$4,490.0 01(8) as "incurred by a the total amount you and alimony. Also, do
For lass Janua For the Janua Part 3:	e calendary 1 to Do List C e either D No. N iii	ar year: ecember 31, 2018 ar year before that: ecember 31, 2017 Certain Payments Y Debtor 1's or Debtor Neither Debtor 1 no individual primarily for During the 90 days become the second of the secon	Unemployment You Made Before You Filed for or 2's debts primarily consumer or Debtor 2 has primarily consumer a personal, family, or househout a personal for bankruptcy, die 7. You we ach creditor to whom you pain to creditor. Do not include payment to creditor. Do not include payment de payments to an attorney for the personal for the personal formula of the personal formula or the personal formula of the pe	\$13,754.00 \$13,754.00 \$0.00 \$0.00 Bankruptcy r debts? umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,825* or more into for domestic support oblighis bankruptcy case. s after that for cases filed on umer debts.	Child Support Child Support s are defined in 11 U.S.C. § 10 I of \$6,825* or more? In one or more payments and ations, such as child support or after the date of adjustments.	\$2,100.0 \$4,490.0 01(8) as "incurred by a the total amount you and alimony. Also, do

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Toyota Motor Credit Corp 5005 N River blvd NE Cedar Rapids, IA 52411-6634	monthly vehicle payment	\$1,152.00	\$24,000.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
	Neill's Wheels US 65 Ross Lane Eugene, OR 97404	vehicle payments	\$1,600.00	\$6,000.00	☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person i a business you operate as a sole proprietor. alimony.	partners; relatives of any gen n control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a general partner; corporations ny managing agent, including one for
	Yes. List all payments to an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co No Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a debt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Par	t 4: Identify Legal Actions, Repossession	ons, and Foreclosures			
Par 9.	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.	tcy, were you a party in a			
	Within 1 year before you filed for bankrup List all such matters, including personal injur	tcy, were you a party in a			
	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.	tcy, were you a party in a			
	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.	tcy, were you a party in a		n suits, paternity a	
	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Heritage Grove Federal Credit	tcy, were you a party in all y cases, small claims action Nature of the case collection action	Court or agency Marion County	n suits, paternity a	Status of the case Pending
	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Heritage Grove Federal Credit Union vs. Samantha Fulfer, Marion	tcy, were you a party in ally cases, small claims action	Court or agency	n suits, paternity a	Status of the case Pending On appeal
	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Heritage Grove Federal Credit	tcy, were you a party in all y cases, small claims action Nature of the case collection action	Court or agency Marion County Court	n suits, paternity a	Status of the case Pending

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 otor 2	GW Todd Fulfer Samantha A. Fulfer		Case numbe	r (if known)					
10.		ithin 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? neck all that apply and fill in the details below.								
		No. Go to line 11.								
	_	Yes. Fill in the information below.								
		litor Name and Address	De	scribe the Property	Date	Value of the				
	Orcu	mor Name and Address	De	Solibe the Froperty	Date	property				
				plain what happened						
	Unic	itage Grove Federal Credit on Box 2227		nds garnished from co-debtor's pay thin 90 days of filing		\$1,221.00				
		em, OR 97308-2227		Property was repossessed.						
		,		Property was foreclosed.						
				Property was garnished.						
				Property was attached, seized or levied.						
		No Yes. Fill in the details. litor Name and Address	De	scribe the action the creditor took	Date action was taken	Amount				
Par	■ 1	-appointed receiver, a custodian, o No Yes List Certain Gifts and Contributior		er official?						
13.		No	uptcy,	did you give any gifts with a total value of more	than \$600 per person?	?				
		Yes. Fill in the details for each gift.								
		s with a total value of more than \$60 person	00	Describe the gifts	Dates you gave the gifts	Value				
		on to Whom You Gave the Gift and ress:								
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution.									
	more Char	s or contributions to charities that the than \$600 rity's Name ress (Number, Street, City, State and ZIP Cod		Describe what you contributed	Dates you contributed	Value				
Par	t 6:	List Certain Losses								
15.		n 1 year before you filed for bankru mbling?	ptcy or	since you filed for bankruptcy, did you lose an	ything because of thef	t, fire, other disaster,				
	_	No Yes. Fill in the details.								
	Desc	cribe the property you lost and the loss occurred	Include	ibe any insurance coverage for the loss the amount that insurance has paid. List pending not claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
Par	t 7:	List Certain Payments or Transfers	S							
		·								

Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Official Form 107

Best Case Bankruptcy

page 4

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you Statement of Financial Affairs for Individuals Filing for Bankruptcy

	consulted about seeking bankruptcy or prepar Include any attorneys, bankruptcy petition prepare			rvices require	d in your bankruptcy.						
	No										
	Yes. Fill in the details.										
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and va transferred	Description and value of any property transferred			Amount of payment					
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.										
	■ No □ Yes. Fill in the details.										
	Person Who Was Paid Address	Description and value of any property transferred			Date payment or transfer was made	Amount of payment					
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi			sfer any pro	perty to anyone, other	than property					
	Include both outright transfers and transfers made include gifts and transfers that you have already li-	e as security (such as the	ne granting of a s	security intere	st or mortgage on your	property). Do not					
	■ No □ Yes. Fill in the details.										
	Person Who Received Transfer Address	Description and va property transferre			any property or s received or debts schange	Date transfer was made					
	Person's relationship to you										
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection No		y property to a s	self-settled tr	ust or similar device o	of which you are a					
	Yes. Fill in the details.										
	Name of trust	Description and va	alue of the prop	erty transfer	red	Date Transfer was made					
Par	List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Sto	rage Units							
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred?	•				,					
	Include checking, savings, money market, or o houses, pension funds, cooperatives, associated No Yes. Fill in the details.				hares in banks, credit	unions, brokerage					
	Name of Financial Institution and	ast 4 digits of	Type of accoun	nt or Da	ate account was	Last balance					
		ccount number	instrument	cl m	osed, sold, oved, or ansferred	before closing or transfer					
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	ar before you filed for	bankruptcy, any	y safe depos	it box or other deposi	tory for securities,					
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had accommoder, State and ZIP Code)		Describe the	contents	Do you still have it?					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
Par	19: Identify Property You Hold or Control for	Someone Else							
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Part 10: Give Details About Environmental Information									
For	the purpose of Part 10, the following definitions	s apply:							
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								
Report all notices, releases, and proceedings that you know about, regardless of when they occurred.									
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environme	ental law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any release of hazardous material?								
	NoYes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Part 11: Give Details About Your Business or Connections to Any Business									
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?									
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
Offici		of Financial Affairs for Individuals Filing		page 6					
Softw	are Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com			Best Case Bankruptcy					

	otor 1 GW Todd Fullotor 2 Samantha A.				Case	number (if known)			
	□ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business.								
	Business Name Address (Number, Street, City, State	and ZIP Code)		ature of the business	1	Employer Identification number Do not include Social Security number or ITIN. Dates business existed			
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code)								
Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.									
/s/	GW Todd Fulfer		/s/ Sa	mantha A. Fulfer					
GW Todd Fulfer			Samantha A. Fulfer						
Signature of Debtor 1			Signature of Debtor 2						
Dat	te April 7, 2019		Date	April 7, 2019					
Did ■ N	No .	ages to Your Stateme	ent of Financial A	Affairs for Individuals i	Filing f	or Bankruptcy (Official Form 107)?			
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No □ Yes. Name of Person Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).									